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ABSTRACT

The research explored whether or not the occurrence and degree of family disability introduced a distinguishable patterned set of social life views among homemakers and, if so, to what extent the patterns are general to different populations. Disability was defined as the inability to assume expected roles. Seven Mexican American migrant workers in California, 75 small town Blacks in East Texas, and 37 rural Whites in Vermont were studied. The social life orientation variables employed in this study were evaluation of life situation (relative to parents), improvement of life conditions (over last 5 years), life satisfaction, housing satisfaction, and marital satisfaction. Major conclusions were: (1) the occurrence of membership disability has a tendency to negatively influence, to a very limited extent, evaluations of levels of positive evaluation of improving life circumstances; (2) the occurrence of membership disability does not produce a negative impact on perceived life satisfactions; and (3) the level of disability among disabled families does not influence the views homemakers have of life progress and social satisfactions. (KM)

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INFLUENCE OF FAMILY DISABILITY ON SOCIAL ORIENTATIONS OF HOMEMAKERS AMONG DIFFERENT ETHNIC POPULATIONS: SOUTHERN BLACK, WESTERN MEXICAN FARM MIGRANT AND EASTERN WHITE RURAL FAMILIES*

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The Problem

Research into the affects of disability has done little more than document the fact that internal and external family stresses can be produced by disability (Kuviesky, Byrd, and Taft, 1973). Gibson and Ludwig (1968:54) found that disability results in a disruption of roles and strained interpersonal relations. Further research maintains that there are significant behavioral correlates of disability for given impairments and for given individuals and that disability often profoundly affects the person's life (Thomas, 1970:251).

Since disability has such a profound affect on individuals it is logical to assume that disability affects families to much the same degree. Disability of a homemaker may strain an entire family system. When the homemaker's health is impaired and she is unable to perform her usual role, the equilibrium of all family members, as well as the stability of the family as a social unit is seriously jeopardized (Fink, 1968; May, 1966). It has been argued that the role of wife and mother is so necessary to the smooth functioning of home life that the husband almost always accepts problems of the home care of his severely disabled wife in preference to the problems that would arise in caring for young children himself or with the aid of a housekeeper, relatives, friends, etc. (Deutsch, 1960:313).

In a similar fashion, disability of a husband/main income source may produce a reduction in income and also cause role conflicts (Thomas, 1970:261). In the instance of disability of the husband, the distance between role prescription and potential role fulfillment

is much greater than for other family roles: his dependency is antithetical to his wife's expectations of his role (Deutsch and Goldston 1960:313). His dependency also may pass the burden of earning an income onto his wife.

Disability in children produces stress for the children and for other family members as well. In a previous study, Moncur (1955:96) indicates that disabled children may display signs of maladjustment in their behavior such as being nervous, being enuretic, having nightmares and night terrors, displaying agressive behavior, being "fussy" eaters, and needing to be disciplined often. Other studies have documented serious social problems within and outside the family for disabled children. A tendency for these children to experience a general social withdrawal has been reported by Thurston (1959:148). Many types of family stress have been attributed to parents' feeling toward disabled children. A common feeling is that of guilt caused by the parents being caught between extremely contradictory feelings of love and hate. Although many parents do not openly admit these feelings of guilt, it can be seen in such reactions as a rejection or fostering of overdependency, or putting pressure on the child (Zuk, 1959:146).

Deutsch and Goldston (1960:314) also found that there are three major categories into which disabled families may fall. The first of these is the family where family life focuses almost entirely on the patient and where many unnecessary and often ostentatious sacrifices are made by family members. Where children are involved, the disabled person is not allowed to be an integral part of the family and is thought of as ill.

In other families, the family acts as if the disabled person does not exist. All medical and financial needs are met. However, these families plan their activities independently of the disabled person.

The third group of families make the disabled person an integral part of the family. This type of familial interaction forces the disabled person to make maximum adjustments to the family routine and, in turn, perceive the disabled family member in terms of her individual, personal qualities rather than the nature and severity of her disability.

Since family life is centered around role prescriptions, the amount of family organization depends upon the extent to which these roles are enacted. Previous research shows that for some families the advent of disability may result in a period of disorganization followed by a reorganization around a new form of distribution of tasks and roles, while, for others, the disability leads to a dissolution of the family through separation or divorce (Nagi and Clark, 1964:215).

The fact that disability has been found to have diverse and multiple impacts on both individual patterns of behavior and social relationships would lead one logically to the proposition that it should influence the critical social and life orientation of people importantly touched by it. Yet, little or no systematic research exists to determine whether or not this proposition is valid. The major purpose and potential contribution of this research is to help fill this void in reference to the family, within the context of data available from a recent interstate study of family poverty.

Research Objectives

The task of this research is to explore the extent to which family disability affects social and life orientations of homemakers: life satisfaction, marital satisfaction, and other related value and attitudinal phenomena. This research will explore whether or not the occurrence of family disability and degree of family disability (when it exists) introduce a distinguishable patterned set of social life views among homemakers and, if so, to what extent the patterns are general to different types of U.S. populations. Data from a recent USDA-CSRS regional study of low-income families provide the basis for this investigation.* More precisely the specific research objectives are:

1. Does the occurrence of disability in a family produce a patterned effect on the following social orientations: life satisfaction, marital satisfaction, and other related value and attitudinal phenomena?
2. Given disability in a family, does level of family disability produce patterned differences in the specific social orientations listed above?
3. Are any patterns observed above generalizable across different NM areas and ethnic groups?

Concepts and Operational Definitions

Disability is defined in this study as the inability to assume expected roles. As an example, children younger than five years old are expected to perform the role of playing. From age five to age 18 (sometimes through the early 20's) they are expected to attend formal school. After formal schooling is completed or terminated to age 65, the role prescription centers aroumd some type of employment and parental roles.

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*This paper contributes to USDA and is also a contribution to CSRS Regional Project NC-90.

For those who reach age 65 (retirement age), role prescriptions center around play or work. If one cannot perform his prescribed role he is labeled disabled.

Individual disability and family disability have been conceptually differentiated in earlier reports. Kuvlesky, Byrd, and Taft (1973:7) define individual disability as any abnormality of personality or biological structure or process that produces stress for the individual in his adjustment to himself or his external environment. They go on to state that whenever the stress which results from a family member's inability to assume expected roles of family system and/or negatively influences the unit's capability for adaptation to the total environment, the resulting patterns of interaction are labeled family disability.

With this definition of disability established, the degrees of disability are determined by ones lack of ability to perform his normal prescriptions. In this study, the measures are of this nature.

Ethnic groups are defined as groups in which members share a common cultural heritage different from that of the majority in the United States. The ethnic groups to be studied here are Mexican Farm Migrants in California, Small Town and Village Blacks in East Texas, and Rural Whites in Vermont: there seems little doubt that these can be considered socially and culturally different populations, even though they share one attribute in common--location in nonmetropolitan areas. It would seem quite obvious that any pattern of association observed in common among these three diverse ethnic groupings located in such widely separated parts of the U.S. could be proposed to be general to most NM populations of the U.S. It is our intent in this analysis to seek such patterns.

For the purposes of this study, social life orientation is defined as the degree to which one adapts to society or his environment through interaction with others. Social life orientation variables employed in this study are evaluation of life situation (relative to parents), improvement of life conditions (over last five years), life satisfaction, housing satisfaction, and marital satisfaction.

Instruments and Measures

A brief description of the indicators used in this analysis are provided below.

Disability

The stimulus question for disability was "Is anyone in this family sick all the time or disabled in any way?" If the respondent said there was, she was asked to describe the seriousness of the disability in terms of school or work performance.

FOR EACH PRE-SCHOOLER ASK:
Which of the following best describes his (her) ability to play?
5. Not able to take part at all in ordinary play with other children.
4. Able to play with other children but limited in amount of kind of play.
3. Not limited in any of the preceding ways.

FOR EACH CHILD IN SCHOOL ASK:
Which of the following best describes his (her) ability in school and activities?
5. Not able to go to school at all.
4. Able to go to school but limited in certain types of schools or in school attendance.
3. Able to go to school but limited in other activities.
2. Not limited in any of the preceding ways.

FOR EACH OTHER FAMILY MEMBER ASK:
Which of the following best describes his (her) ability to work?
5. Not able to work (or keep house) at all.
4. Able to work (keep house) but limited in kind or amount of work.
3. Able to work (keep house) but limited in other activities.
2. Not limited in any of the preceding ways. (NC-90 Patterns of Family Living Questionnaire, 1970:3).

The responses were coded "1" if the person was not disabled and "2" through "5" for the various degrees of disability indicated above. With "1" being the lowest degree of disability (none) and "5" being the highest (not able to work et cetera), the distinctions in the instrument were kept for the measures in this analysis.

The family disability index was derived by summing the degrees of disability for each family member and dividing by the number of members in the family (Taft and Byrd, 1972:11-12). In cases where a family member did not have a number coded for degree of disability, all other numbers were added and the sum was divided by the number of family members who had numbers coded for the degree of disability.

An apparent weakness of the disability measure is that no objective criteria is used to determine actual physical, mental, or emotional problems. Instead, the homemaker's subjective evaluation of the member's ability to perform was relied upon. The homemaker is probably the one who decides who is well enough to go to play, go to school or work and she probably exerts her influence to keep family members at home when she believes they are too ill.

Ethnic Identity

Ethnicity was determined by interviewers, classification of respondents based on actual, direct observation. There is no objective criteria used to determine actual ethnic composition of the respondents since the subjective evaluation of the interviewer was relied upon.

Social and Life Orientations

Information concerning social orientation variables was tapped by asking the following questions.

Life Situation Compared to Parents or Guardian

Respondents were asked to compare their life situation to their parents or guardians. Responses were (1) "worse," (2) "same," and (3) "better."

Improvement Over Last Five Years

Respondents were asked to compare their life situation, (financial, living conditions, job opportunities, and opportunities for children) at the present with their life situation five years ago. Responses for each were (1) "worse," (2) "same," and (3) "better."

Life Satisfactions

Housing. Respondents were asked to express satisfaction with their housing. Responses were (1) "very unsatisfactory," (2) "unsatisfactory," (3) "don't know," (4) "satisfactory," (5) "very satisfactory."

Marital. Marital satisfaction was determined by responses to the following questions:

(1) "How satisfied are you with your husband's understanding of your problems and feelings?"
(2) "How satisfied are you with the attention you receive from your husband?"
(3) "How satisfied are you with your husband's help around home?"
(4) "How satisfied are you with the time you and your husband spend just talking?"

Responses were (1) "very satisfied," (2) "somewhat satisfied," (3) "somewhat dissatisfied," and (4) "very dissatisfied."

Selection of Respondents and Interviewing

In all of the states included in the study, the respondents were female homemakers not older than 65 years of age, and not younger than 18 years of age (unless they were mothers) having children in the household. Each population was different in respect to regional location and ethnic type. However, the populations were similar in that they were all located in nonmetropolitan areas. Table 1 summarizes the disposition of families contacted during the interviewing process. A more detailed description of the interviewing process is presented in Jackson and Kuvlesky (1973).

Analysis and Findings

This section is organized in three parts in accordance with our specific research objectives mentioned previously. In the first part we explore variations in life and social orientations by whether or not member disability exists in the family for each of the study populations involved. Next, limiting analysis to only the families having a disabled member (Table 2),

Table 1. Summary of Interview Information on the Three Study Populations By State

	Study Populations		
	California: Farm Migrants	Texas: Small NM Places	Vermont: Rural
	-No.-		
Number of Interviewers	17	6	7
Number Ineligible	21	287	233
Number of Interviews Completed	168	259	216
Refusals and Others*	45	13	124
Ethnic Identity	Mexican American	Black	White

*Includes evasions, vacant houses, respondents did not speak English, homemaker was never able to be contacted, e.g., because they were ill, because they evaded the interviewer, because they were away for the summer.

we explore the relationship between "level" of family disability that existed and these orientation variables for each of the three study populations. Finally, in a summary overview, we attempt to discern any common patterns of variable associations that are demonstrated among the three ethnic populations studied.

We view this investigation as strictly exploratory, ex post facto analysis and are less concerned with rigor of statistical analysis as compared with meaningful interpretation of detailed descriptions of basic measures available to us. Because of the small Ns involved in each population and the relative homogeneity of the three study populations, we can make more out of common patterns (empirical generalizations) than we can differences. In the later case, however, we should be able to evolve some directive hypotheses for future work.

In most cases, we are working with, at best, ordinal level measures. Our strategy in utilizing these will be to rely both on comparative analysis of proportional distributions and mean ranks for descriptive purposes. When appropriate, Chi Square will be utilized as a test of statistical significance of differences.

Occurrence of Disability and Orientations

In Table 2, it was shown that the three populations involved here varied markedly in the frequency of having disabled members. Texas rural blacks led with over one-quarter of the grouping in this status, and California migrants were at the other extreme, having only 4% of their families so classified. Because the actual number of California families experiencing disability was only 7; this was possibly due to the unique (transients, partial families) nature of the life style of this group--caution is required in interpreting any second-order statistical measures related to these respondents. In the following analysis, attention is given to discerning patterns at two levels of analysis: intrastate and interstate or interethnic; however, predominant emphasis was given the latter.

Relative Life Situation As Compared With Parents (Table 3)

The occurrence of disability demonstrated a slight positive association with a tendency for Texas black and Vermont white homemakers to more often view their life situation as "worse" than their parents. For all three populations, the marked tendency of the majority to see their situations as "better" than their parents was somewhat weaker when membership disability existed. On total distributions of responses the Texas blacks were the only population demonstrating a clearly marked difference in regard to life situation evaluation between families with and without disability; and, even in this case the differences were small.

Perhaps the most significant conclusion to be drawn from this set of data is that all rural ethnic groups studied, regardless of the occurrence of disability, made positive judgments of improvement of their life situation as compared with their parents. Few of any grouping saw their situation as worse than their parents as indicated by the following listing abstracted

Table 2. Rate of Occurrence of Member Disability In Families From Populations Selected for Study

	Texas: Small NM (N=259)	Calif.: Farm Migrants (N=168)	VT: Rural White (N=216)
	- - -

Table 3. Evaluation of Life Situation As Compared With Parents by Occurrence vs. Nonoccurrence of Family Disability for the Three Study Populations.

Relative Life Situation	Texas[1] (NM Blacks)		California[2] (MA Migrants)		Vt.[3] (Rural White)	
	NO (N=182)	O (N=74)	NO (N=156)	O (N=7)	NO (N=174)	O (N=36)
	- - - - %- - - -		- - - - %- - - -		- - - - %- - - -	
(1) Worse	4	15	7	0	5	11
(2) Same	6	5	29	47	18	14
(3) Better	90	80	64	53	77	75
Total	100	100	100	100	100	100
No Information	2	1	5	0	5	1

[1] $X^2 = 8.41$ d.f. = 2 P=>.01<.02

[2] Chi Square test was not applicable.

[3] $X^2 = 2.51$ d.f. = 2 P=>.20<.03

from Table 3:

		Proportion Indicating "Worse"
Texas	O*	15
Vermont	O	11
California	NO*	7
Vermont	NO	5
Texas	NO	4
California	O	0

Clearly, even the most disadvantaged of the disabled families of these "disadvantaged" minority groups were optimistic about intergenerational social and life improvements.

Improvement of Life Circumstances - Last Five Years (Table 4)

Almost without exception, for all four dimensions of life situations considered and for all three ethnic populations, occurrence of disability was associated with a lower mean evaluation score of improvement of circumstances over the last five years, Table 4. This almost incredibly consistent pattern of variation clearly leads to the conclusion that, regardless of ethnicity and location, the presence of a disabled family member tends to decrease evaluations of temporal improvement in life conditions among rural populations. In this respect, both Texas blacks and Vermont whites indicated a moderately strong association (an average difference of -.4), while California migrants demonstrated a weaker relationship (-.2).

On the average, all ethnic groupings perceived their situation as having gotten "better" over the last five years--the families not experiencing a disabled member more consistently made this judgment than those families

*Through the remainder of this section, an "O" will symbolize Occurrence of member disability, and a "NO" will stand for Nonoccurrence.

Table 4. Summary of Mean Scores on Evaluation of Improvement In Life Circumstances Over The Last Five Years By Occurence-Nonoccurence of Disability For Each Study Population.

Life Circumstances	Texas			California			Vermont	
	Occurence (N=75)	Non-Occurence (N=184)	Difference in Means	Occurence (N=7)	Non-Occurence (N=161)	Difference in Means	Occurence (N=37)	Non-Occurence (N=179)
	Mean Scores*							
a. Financially	2.3	2.7	-.4	2.7	2.9	-.2	2.2	2.7
b. Living Conditions	2.2	2.7	-.5	2.7	2.9	-.2	2.4	2.8
c. Job Opportunities	2.4	2.8	-.4	2.5	2.8	-.3	2.6	2.7
d. Opportunities for Children	2.7	2.9	-.2	3.0	3.0	0	2.4	2.8
Total Mean	2.4	2.8	-.4	2.7	2.9	-.2	2.4	2.8

*Responses were scored as follows: 1=worse, 2=same, and 3=better.

having such a member (see Table 1, Appendix). Again, we see a consistently optimistic or positive perception of improving life circumstances among these generally disadvantaged groups. The weakest evaluation in this regard for Texas and California was in reference to "Opportunities for Children" and for Vermont, in reference to "Job Opportunities."

Variations in reference to the perception of improvement by differentials within each state showed that for those who experienced disability, there was a tendency for mean scores for each differential to vary as much as .4 to .5 degrees. For those who did not experience disability, mean scores for each differential only varied .1 or .2 degrees. It can be concluded that homemakers from disabled families demonstrated a greater degree of consistency in their evaluation than the others.

Life Satisfactions: Housing and Marital (Table 5).

In reference to level of satisfaction with housing, the California farm migrants and Vermont rural families demonstrate weak, negative associations with existence of membership disability, and Texas evidenced a contrary relationship. However, for all three populations, the differentials were relatively small--ranging from a difference in mean satisfaction scores of -.3 (NO-O) for California respondents to -.6 for Vermont rural families. In almost every case, the mean satisfaction score indicated a level of "moderate satisfaction" with housing by these generally disadvantaged groups. An exception, tending toward a level of higher perceived satisfaction, was observed in regard to the nondisabled Vermont category (mean score = 3.3). The only significant general conclusions to be drawn from this set of data is that NM minority groups--regardless of location, ethnic identity, or presence of membership disability--generally feel satisfied with their housing. Con-

Table 5. Summary of Mean Scores on Life Satisfactions By Occurence-Nonoccurence of Disability For The Three Study Populations.

Life Satisfactions	Texas		California		Vermont	
	NO (N=184)	O (N=75)	NO (N=161)	O (N=7)	NO (N=179)	O (N=37)
	Mean Satisfaction Scores*					
1. Housing	2.5	2.9	2.8	2.5	3.3	2.7
2. Marital Total Scores						
Item Scores:	3.2	3.1	3.4	3.6	3.4	3.2
a. Husband Understands	3.2	3.0	3.5	3.5	3.4	3.2
b. Husband Attentive	3.3	3.2	3.5	3.8	3.6	3.1
c. Husband Helps	3.0	3.0	3.5	3.5	3.4	3.1
d. Talking With Husband	3.2	3.1	3.5	3.7	3.3	3.2

*Four point scale ranging from "Very Unsatisfactory" (1) to "Very Satisfactory" (4).

sidering the objective evaluations made of housing adequacy as a part of this study and reported elsewhere (Kuvlesky, Byrd, and Taft; 1972), this is indeed a surprising observation. In Texas, for instance, many of the families did not have toilets inside their houses or even running water--most did not have hot, running water. Clearly standards of housing adequacy vary markedly with life circumstance and knowledge of alternatives.

Marital Satisfaction (Table 5)

Variations in reference to mean total marital satisfaction scores were slight and inconsistently patterned. In general, occurrence of disability in the family obviously did not make a differential impact on the homemakers in this regard. All analytical categories of respondents indicated a high level of satisfaction with their mates--all ranging between "satisfactory" and "very satisfactory." The same pattern held true in reference to the mean scores (shown in Table 5) for the individual dimensions of marital satisfaction examined here.

Degree of Family Disability and Orientations

The major independent variable involved in this section, "family disability," is a composite measure representing the general level of membership disability in the family unit and includes both number of members disabled and their degree of disability. The degrees of family disability have been categorized into three "level" classes as follows:

Level I - Low Level of Disability
Level II - Intermediate Level
Level III - High Level

Levels of disability were derived by listing in sequential order the family disability index score for each family where disability occurred. The listing was then divided into three groups containing approximately

the same number of families. Group I then became Level I indicating a low level of disability, Group II became Level II indicating an intermediate level of disability, and Group III became Level III indicating the highest level of disability (Table 6).

This analysis precludes complex techniques and rigorous statistical tests because of the very small total numbers of each population, particularly among the California migrants (N=7). The frequencies of the "level" categories are so small in the California case that we will generally ignore this data in the following interpretations although data for this population will be included in the tables presented. While we realize the severe limitations of this particular analysis, it is justified because of the near total lack of knowledge on how the magnitude of disability influences aspects of family life.

Life Situation Relative to Parents (Table 7)

Frequency distributions by levels of disability for the three study populations reveal that there were no discernible consistent patterns in relation to relative life situation by levels of disability. The distributions show a heavy concentration of responses in the "better" category for both Texas blacks and Vermont whites.

Total mean scores for Texas blacks and for Vermont whites show that both populations consider their relative life situations as moderately improved. Mean scores by levels of disability show that those who experience high levels of disability do not necessarily consider their life situation as "worse" when compared to parents or guardians. This is probably contrary to most speculative literature about this problem. In the Mexican American and the Vermont white study populations, total mean scores

Table 6. Distribution of Study Populations - Texas Blacks, California Mexican Americans, and Vermont Whites - Over the Three Levels of Disability.

	State and Ethnic Group						
	Texas Blacks		California Mexican Americans		Vermont Whites		Total N
	N	%	N	%	N	%	
Level I (1-10)*	19	25	4	57	11	29	34
Level II (11-20)*	30	40	1	14	15	40	46
Level III (21 and over)	26	34	2	28	11	29	39
Total N	75	100	7	100	37	100	119

*Indicates family disability index score.

Table 7. Evaluations of Life Situation as Compared With Parents By Level of Family Disability For the Three Study Populations

Relative Life Situation	Disability Levels								
	Texas			California			Vermont		
	Low	Interm.	High	Low	Interm.	High	Low	Interm.	High
	- - - - No.- - - -			- - - - No.- - - -			- - - - No.- - - -		
(1) Worse	4	0	7	0	0	0	1	2	1
(2) Same	0	2	2	1	1	2	1	4	0
(3) Better	15	28	16	3	0	0	9	8	10
Total	19	30	25	4	1	2	11	14	11
Mean Scores	2.5	2.9	2.2	2.7	2.0	2.0	2.7	2.2	2.8

Frequencies absent or too low in too many cells to carry out valid chi square tests.

reveal that their life situations have not improved to as high a degree as for their Texas counterparts. (Mean scores of 2.0 and 2.2 as compared to a relatively high 2.9 in Texas.)

The only generalization which is apparent from this data is that none of the study populations considered themselves as having a life situation which is worse than their parents or guardians, irrespective of level of disability. Also, we can generalize from the data that the majority of families in the study populations considered their life situations to be the same, or in most instances, better than that of their parents or guardians, regardless of the level of family disability they experienced.

Improvement of Life Circumstances - Past 5 Years (Table 8)

The data presented in Table 8 indicate that level of family disability clearly had no patterned influence on homemakers' perceptions of change in either total life situation or specific attributes of this in reference to all three study populations. Excluding the California migrants, the vast majority of mean scores shown indicate that all subpopulations were relatively homogeneous in having perceived their life as having improved to some extent over the last five years. One notable exception in this regard--having lower estimates of improvement--was observed in reference to "Texas Blacks--Level III" in respect to living conditions.

Life Satisfactions (Table 9)

Housing. No discernible patterned association was observed between level of family disability and satisfaction with housing. However, the lowest mean satisfaction scores of all subpopulations (2.0 and 2.1, out of a possible 4) were evidenced by the California and Vermont groupings having the lowest levels of family disability (Class I). It can be concluded from

Table 8. Summary of Mean Improvement Scores Over Last Five Years By Levels Of Disability For Each Study Population

	Texas			California			Vermont		
	Level I (N=19)	Level II (N=30)	Level III (N=26)	Level I (N=4)	Level II (N=1)	Level III (N=2)	Level I (N=11)	Level II (N=15)	Level III (N=11)
	-Mean Scores*-								
Improvement Over Last Five Years Total:	2.5	2.5	2.3	2.6	2.7	3.0	2.6	2.2	2.6
Item Scores:									
a. Financially	2.6	2.3	2.1	2.5	3.0	3.0	2.6	2.1	2.2
b. Living Conditions	2.6	2.3	1.9	2.5	3.0	3.0	2.5	2.4	2.5
c. Job Opportunities	2.4	2.5	2.5	2.5	2.0	3.0	2.6	2.0	3.2
d. Opportunities for Children	2.6	2.8	2.7	3.0	3.0	3.0	2.6	2.4	2.5

*Rank scores used were as follows: 1=worse, 2=same, 3=better.

Table 9. Satisfaction With Housing and Dimensions of Marital Life By Levels of Disability For The Three Study Populations: Summary of Mean Satisfaction Scores

Life Satisfactions	Texas			California			Vermont		
	Low	Inter.	High	Low	Inter.	High	Low	Inter.	High
	---Mean Scores---			---Mean Scores---			---Mean Scores---		
1. Housing	3.1	2.7	3.0	2.0	4.0	3.0	2.1	2.9	3.0
2. Marital, Total Score	3.0	3.2	3.2	3.5	3.6	3.7	3.2	3.1	3.4
Item Scores:									
a. Husband Understands	2.8	3.1	3.3	3.7	3.0	3.5	3.2	3.1	3.5
b. Attention From Husband	3.1	3.2	3.4	3.7	4.0	4.0	3.1	3.1	3.3
c. Husband Helps	2.9	3.0	3.1	3.0	3.5	3.3	3.3	3.0	3.2
d. Talking with Husband	3.3	3.3	2.8	3.5	4.0	4.0	3.2	3.3	3.3

these findings, that the magnitude of disability does not bear a negative influence on perceptions of adequacy of housing.

Marital Relationship. Except for the fact that California respondents tended to indicate a slightly higher level of general marital satisfaction than the other two groups, no marked differentials in total or particular mean satisfaction scores were observed. A tendency did exist for the "low" disability groupings to have lower general satisfaction scores than others; however, the differences were slight and probably not sociologically or substantively meaningful (to say nothing of statistical significance!). All populations and subpopulations tended to have high marital satisfaction scores--ranging almost entirely between "satisfactory" to "very satisfactory."

In can be concluded from these observations that degree of family disability was not positively related to deteriorating marital circumstances.

Summary Overview of Findings and Conclusions

Major findings of two types are summarized--those applicable to our original research questions and additional findings having empirical utility and significance for future research. These are presented below in outline form in two parts corresponding to our two major independent variables (occurrence-nonoccurrence of disability and degree of family disability).

Summary of Major Findings

A. Occurrence of Disability (Table 10)

1. For all three NM ethnic types studied, occurrence of family disability was negatively associated to a small extent with a more optimistic evaluation of improvement of life chances as compared with parents. This relationship was stronger among Texas blacks and Vermont whites than the California ethnic grouping.

2. For all three NM ethnic types, occurrence of family disability was negatively associated in a moderate way with an optimistic view of improvement of life circumstances over the recent past. This relationship was strongest among Texas blacks.

Table 10. Summary Interethnic Comparison Of Relations of Occurence of Disability To Selected Life Orientations.

	Nature of Relationship	Magnitude of Association	Consistency of Pattern	Interethnic Differences
1. Situation Compared With Parents:	Negative	Weak	High	B>W and MA
2. Improvement of Life Circumstances-Past Five Years:	Negative	Moderate	High	B and W>MA
3. Life Satisfactions-				
Housing:	+ and -	Weak	Low	W>B and MA
Marital:	None	None	Nigh	----------

3. No consistent or strong pattern of association was observed between occurrence of family disability and two aspects of life satisfaction--housing and marital relations.

4. Perhaps more significant than the general differentials, or lack of them, cited above were generalizations drawn from interethnic comparisons on the orientation variables irrespective of occurrence of disability:

   (1) All groupings demonstrated a generally optimistic evaluation of improvement of life situations in the recent past and almost all saw their situations as better than their parents.

   (2) High levels of satisfaction were generally evidenced with both housing and marital relations.

B. Disabled Families - Degree of Disability (Table 11)

Except for two relatively strong associations and one weak one relating to particular ethnic groupings on particular orientations, nothing significant in the way of patterned general differentials were observed in reference to levels of disability. The particularized findings of note were:

   (1) A strong, negative relationship between level of disability and evaluation of life situation relative to parents among the California migrants. Caution is advised in reference to this finding because of the low numbers involved.

   (2) A strong, positive association was observed between level of disability and satisfaction with housing among NM, Texas black homemakers.

Major Conclusions

As was indicated previously, our major objective was to search for generalizations that held across the variable nature of the three populations studied. It is our judgment that because of the dramatic variation in ethnicity and location among these three study groupings, any generalizations drawn would probably reflect the general condition of most relatively disadvantaged NM-rural populations in the U.S.: irrespective of the limitations involved in the study. At least, the conclusions listed below will serve as provocative hypotheses to be tested by future research:

Table 11. Summary of Comparative Interethnic Observations On Level Of Family Disability And Social Life Orientations of Homemakers From Families Experiencing Disability

Orientation	Nature of Association			Magnitude of Association			Interethnic Patterns
	Texas	Calif.	Vt.	Texas	Calif.	Vt.	
1. Life Situation: Relative to Parents	0	Negative	0	0	Positive	0	None
2. Improvement of Life Sit.: Past Five Years	0	Positive	0	0	Negative	0	None
3. Life Satisfactions: Housing	0	0	Positive	0	0	Positive	None
Marital	0	0	0	0	0	0	None

1. It is concluded that the occurrence of membership disability has a tendency to negatively influence to a very limited extent, evaluations of levels of positive evaluation of improving life circumstances. Furthermore, it is concluded that all NM - rural populations tend to be optimistic in this regard.

2. It is concluded that the occurrence of membership disability does not produce a negative impact on perceived life satisfactions (relative to housing and marriage). Furthermore, it is clear that homemakers of all kinds living in NM-rural areas perceive themselves as generally very satisfied in this regard.

3. It can be concluded, with few exceptions, that level of disability among disabled families does not influence the views homemakers have of life progress and social satisfactions. There is no evidence in this study to indicate that increasing levels of family disability are associated with either negative or pessimistic views of life progress, home, or family.

Discussion

Although it has often been proposed that disability affects social relationships and orientations, little research has been done to fill the void of information which deals with disability in terms of its affect on the family and its internal processes. This study is viewed as a small beginning in filling this void. It focuses on the little-researched area of disability within the context of the family—the affect of disability on perceptions and attitudes toward life situations, life improvements, and life satisfactions. As has been mentioned previously, the generalizations made as a result of this study probably reflect the general condition of most relatively disadvantaged N-M rural populations in the United States because of the dramatic variability in ethnicity in the three study populations involved--California, Mexican Migrants; Texas NM Blacks, and Vermont rural white families. A disadvantage of this purposive selection of study units, however, is that we can do little but speculate about the general nature of any interethnic differences observed. This does not seem to be a major difficulty here, because the study populations were for the most part surprisingly similar in reference to the variables examined in our analysis.

Major generalizations derived from the study have important implications in that they apparently contradict the speculative, theoretical or poorly grounded assertions existing in the literature in some cases. These generalizations are:

1. The occurrence of membership disability has a tendency to influence negatively evaluation of improving life circumstances.
2. The occurrence of membership disability does not produce a negative impact on perceived life satisfactions.

3. No evidence is presented to show that increasing levels of disability are associated with either negative or pessimistic views of life progress, home, or the family.

Since most respondents, regardless of family disability, had a positive evaluation of improvement of life circumstances, the aggregate finding that negative evaluations were slightly higher among disabled families has to be interpreted carefully. It is likely that only certain kinds of disabilities or particular effects of these produce a negative impact on an appraisal of family progress. Our measures of membership disability do not lend themselves to evaluating this hypothesis; however, this does point to a clear need to establish more detailed and precise measures of types of disability. We have explored this need in an earlier conceptual work (Kuvlesky, Byrd, and Taft, 1973).

The rather surprising fact that neither occurrence or degree of disability substantially influenced perception of life satisfactions may be explained by the fact that all the groups studied were disproportionately "disadvantaged" with the larger social context in which they existed. It may be that their standards of adequacy of life conditions are less demanding than those of other populations, particularly the middle SES Metropolitan ones. Obviously, there is a need to explore this question in future research. In addition, research is needed to test the extent to which our generalizations are valid for other rural and NM populations not considered in this study, as well as to explore further variations among families of the ethnic types studied.

The rather consistent and marked similarity of the three diverse ethnic groupings studied on life status improvement, life satisfactions, and more specific aspects of both of these would appear to support the notion of, at least, some common reaction to generally disadvantaged situations (i.e. "culture of poverty"); however, in a way that is positive and directly contrary to that usually proposed.

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APPENDIX

Table 1. Summary Table of Improvement in Life Circumstances Over Last Five Years by Occurrence and Nonoccurrence of Disability.

	Texas[1]		California[2]		Vermont[3]	
	Occurrence	Nonoccurrence	Occurrence	Nonoccurrence	Occurrence	Nonoccurrence
	Frequency Distribution					
Improvement Over Last Five Years						
a. Financially						
1. Worse	15	15	0	8	13	6
2. Same	14	25	3	36	39	10
3. Better	44	132	3	87	100	20
Total	73	162	6	131	152	36
	[1] X^2=9.56		d.f.=4		P > .01, <.001	
	[2] X^{2*}= Chi Square Test not applicable.					
	[3] X^2=12.94		d.f.=4		P > .02, <.01	
b. Living Conditions						
1. Worse	15 (20.0)	14	0	6	6	0
2. Same	19 (25.3)	29	3	36	47	16
3. Better	39 (52.0)	129	3	89	99	20
Total	73	162	6	131	152	36
	[1] X^2=17.97		d.f.=4		P >.01, <.001	
	[2] X^{2*}= Chi Square test not applicable					
	[3] X^2=1.15		d.f.=4		P >.30, <.20	

Table 1. (Continued)

	Texas[1]		California[2]		Vermont[3]	
	Occurrence	Nonoccurrence	Occurrence	Nonoccurrence	Occurrence	Nonoccurrence
			-Frequency Distribution-			
c. Job Opportunities						
1. Worse	10 (13.3)	6	1	17	9	4
2. Same	13 (17.3)	36	2	29	62	10
3. Better	50 (66.6)	128	3	89	76	18
Total	73	170	6	125	147	32
	[1]/ X^2=14.56		d.f = 4		P >.01,<.001	
	[2]/ X^2= Chi Square Test not applicable					
	[3]/ X^2 = 11.76		d.f.= 4		P >.02,<.01	
i. Opportunities for Children						
1. Worse	5	5	0	5	10	2
2. Same	3	11	1	26	46	10
3. Better	65	156	4	96	87	23
Total	73	172	5	127	143	35
	[1]/ X^2= 22.69		d.f.=4			
	[2]/ X^2* Chi Square Test not applicable					
	[3]/ X^2 = 20.17		d.f.=4			

Table 2a. Summary Table of Frequency Distributions on Housing Satisfaction by Occurrence vs. Nonoccurrence of Disability.

	Texas[1]		California[2]*		Vermont[3]	
	Occurrence	Nonoccurrence	Occurrence	Nonoccurrence	Occurrence	Nonoccurrence
	- - - - - - - - - - - - - - - -		-Frequency Distribution-		- - - - - - - - - - - - - - - -	
Housing Satisfaction						
Very Unsatisfactory	9	14	1	7	2	2
Unsatisfactory	29	67	1	19	2	8
Satisfactory	7	88	2	99	22	88
Very Satisfactory	3	13	2	14	6	81
Total	48	182	6	139	32	179

[1] $X^2 = 2.44$ d.f. = 2 P= >.20, <.30

[2] Chi Square test was not applicable

[3] $X^2 = 8.58$ d.f. = 2 P= >.02, <.01

Table 2b. Summary Table of Frequency Distributions on Marital Satisfaction by Occurrence vs. Nonoccurrence of Disability.

	Texas[1]		California[2]*		Vermont[3]	
	Occurrence	Nonoccurrence	Occurrence	Nonoccurrence	Occurrence	Nonoccurrence
	----------	----------	Frequency Distribution	----------	----------	----------
Marital Satisfaction						
a. Husband's understanding of problems and feelings.						
Very Dissatisfied	0	5	0	9	4	4
Somewhat Dissatisfied	5	12	0	2	5	9
Somewhat Satisfied	17	71	3	47	9	60
Very Satisfied	14	50	4	99	16	99
Total	36	138	7	157	34	172
	[1] X^2 = 8.62		d.f. = 6		P= >.20,<.10	
	[2] Chi Square test was not applicable					
	[3] X^2 = 31.4		d.f. = 6		P= >.001	
b. Attention received from husband						
Very Dissatisfied	1	3	0	6	4	3
Somewhat Dissatisfied	8	11	0	6	2	4
Somewhat Satisfied	9	55	1	44	9	44
Very Satisfied	18	69	6	102	19	121
Total	36	138	7	158	34	172
	[1] X^2 = 8.96		d.f. = 6		P= ≥.20,<.10	
	[2] Chi Square test was not applicable		d.f. = 6		P= >.01,<.001	
	[3] X^2 = 18.1					

	Texas[1]		California[2]*		Vermont[3]	
	Occurrence	Nonoccurrence	Occurrence	Nonoccurrence	Occurrence	Nonoccurrence
	Frequency Distribution					
c. Husband's help around home						
Very Dissatisfied	1	11	0	7	5	8
Somewhat Dissatisfied	6	24	0	5	4	8
Somewhat Satisfied	14	56	3	40	10	54
Very Satisfied	15	47	4	106	15	102
Total	36	184	7	158	34	172
[1] X^2 = 6.02				d.f. = 6	P= >.50, <.30	
[2] Chi Square Test was not applicable						
[3] X^2 = 45.86				d.f. = 6	P= >.001	
d. Time spent talking with husband						
Very Dissatisfied	2	5	0	6	5	6
Somewhat Dissatisfied	4	17	0	6	2	21
Somewhat Satisfied	10	61	2	45	8	55
Very Satisfied	20	55	5	100	19	90
Total	36	138	7	157	34	172
[1] X^2 = 3.94				d.f. = 6	P= >.80, <.70	
[2] Chi Square test was not applicable						
[3] X^2 = 21.49				d.f. = 6	P= >.01, <.001	

Table 3. Summary of Frequency Distributions of Improvement in Life Circumstances Over the Last Five Years by Levels of Disability.

	Texas			California			Vermont		
	Level I	Level II	Level III	Level I	Level II	Level III	Level I	Level II	Level III
	Frequency Distribution								
Improvement Over Last Five Years									
a. Financially									
1. Worse	3	5	7	0	0	0	1	3	2
2. Same	1	7	6	2	0	1	2	4	4
3. Better	15	17	12	2	1	0	8	7	5
Total	19	29	25	4	1	1	11	14	11
b. Living Conditions									
1. Worse	2	5	8	0	0	0	0	0	0
2. Same	2	9	8	2	0	1	5	6	5
3. Better	15	15	9	2	1	0	6	8	6
Total	19	29	25	4	1	1	11	14	11
c. Job Opportunities									
1. Worse	3	3	4	1	0	0	0	3	1
2. Same	5	6	2	0	1	1	4	3	3
3. Better	11	20	19	3	0	0	7	7	4
Total	19	29	25	4	1	1	11	13	8
d. Opportunities for Children									
1. Worse	2	1	2	0	0	0	1	0	1
2. Same	2	1	0	0	0	1	3	3	3
3. Better	15	27	23	3	1	0	6	10	7
Total	19	29	25	3	1	1	10	13	11

Table 4. Summary Table of Frequency Distribution of Housing Satisfaction and Marital Satisfaction by Levels of Disability.

	Texas			California			Vermont		
	Level I	Level II	Level III	Level I	Level II	Level III	Level I	Level II	Level III
	-Frequency Distribution-								
Housing Satisfaction									
Very Unsatisfactory	1	4	4	1	0	0	0	2	0
Unsatisfactory	8	14	7	0	0	1	1	1	0
Satisfactory	7	11	13	1	0	1	5	8	9
Very Satisfactory	3	1	2	1	1	0	4	4	2
Total	19	30	26	3	1	2	10	15	11
Marital Satisfaction									
a. Husband's understanding of problems and feelings									
Very Dissatisfied	0	0	0	0	0	0	1	2	1
Somewhat Dissatisfied	1	3	1	0	0	0	4	1	0
Somewhat Satisfied	6	9	2	1	1	1	1	5	3
Very Satisfied	4	5	5	3	0	1	4	7	5
Total	11	17	8	4	1	2	10	15	9
b. Attention received from Husband									
Very Dissatisfied	1	0	0	0	0	0	1	2	1
Somewhat Dissatisfied	2	4	2	0	0	0	1	1	0
Somewhat Satisfied	2	6	1	1	0	0	4	3	2
Very Satisfied	6	7	5	3	1	2	4	9	6
Total	11	17	8	4	1	2	10	15	9
c. Husband's help around home									
Very Dissatisfied	0	1	0	0	0	0	2	2	1
Somewhat Dissatisfied	2	2	2	0	0	0	1	2	1
Somewhat Satisfied	3	9	2	1	1	1	3	4	3
Very Satisfied	6	5	4	3	0	1	4	7	4
Total	11	17	8	4	1	2	10	15	9

Table 4. (continued)

	Texas			California			Vermont		
	Level I	Level II	Level III	Level I	Level II	Level III	Level I	Level II	Level III
	Frequency Distribution								
d. Time spend talking with husband									
Very Dissatisfied	1	1	0	0	0	0	1	2	2
Somewhat Dissatisfied	0	2	2	0	0	0	0	1	1
Somewhat Satisfied	5	4	1	2	0	0	4	2	2
Very Satisfied	5	10	5	2	1	2	5	10	4
Total	11	17	8	4	1	2	10	15	9